

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000027619

Entity Name: AMERICA'S LATIN PRODUCTS, INC.

FILED
Mar 27, 2007
Secretary of State

Current Principal Place of Business:

1420 GEMINI BLVD.
SUITE 12
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

7002 KINGSPOLINE PKWY
SUITE 207-A
ORLANDO, FL 32819

New Mailing Address:

1420 GEMINI BLVD
SUITE 12
ORLANDO, FL 32837

FEI Number: 91-2188009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, GILBERTO G
1420 GEMINI BLVD.
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GOMEZ, GILBERTO G
Address: 13824 TURTLE MARSH LOOP, #637
City-St-Zip: ORLANDO, FL 32837

Title: DST () Delete
Name: SUAREZ, MARIA
Address: 13524 TURTLE MARSH LOOP, #637
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GOMEZ, GILBERTO G
Address: 735 FLOWER FIELDS LANE
City-St-Zip: ORLANDO, FL 32824

Title: DST (X) Change () Addition
Name: SUAREZ, MARIA
Address: 735 FLOWER FIELDS LANE
City-St-Zip: ORLANDO, FL 32824

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIA SUAREZ

DST

03/27/2007

Electronic Signature of Signing Officer or Director

_____ Date